Name In Full Robert M. Chaney

Certificate of Death

Died at Town St Michaels County Talbot MARYLAND

Date 1899 April Month 4 Day 2 Age Y. 2 M. 6 D. Native of St Michaels Occupation

Male ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

~~Female~~ Colored ~~Single~~ ~~Widower~~ ~~Number of children living~~

~~Husband~~ ~~Wife~~ of

Father's Name Wm H. Chaney

Mother's Name Sadie R

Cause of Death Primary

Immediate Lagrippe

9

How long sick 4 months

~~Accident, Suicide, Homicide~~

Reported by C E Whitley undertaker

Address St Michaels

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79998

Attended by Dr. No Dr

of

Seen by Coroner

of

information on this from
his Father Wm H Blaney

Name in Full

Certificate of Death

Henry Clay Culbreth

Died at Town Oxford County Talbot MARYLAND

Date 1897 Month 4 Day 6 Age Y. 69 M. 10 D. 2 Native of Md. Occupation None

Male ~~Female~~ White ~~Colored~~ Married ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~

Number of children living 2

Husband of Wife Mary E. Truitt

Father's Name Samuel Culbreth

Mother's Name Mrs Baynard

Cause of Death: Primary Paralysis 44 How long sick

Immediate "

Accident, Suicide, Homicide

Reported by J. A. Stevens

Address Oxford

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name In Full | Certificate of Death

William Henry Cummings

Died at Town: St Michaels County: Talbot Co MARYLAND

Date 1899 Month: 4th Day: 19th Age Y.: 76 M.: 9 D.: 20 Native of: Baltimore Md Occupation: Carpenter

Male ~~Female~~ White ~~Colored~~ Married ~~Single~~ ~~Widow~~ Widower ~~Divorced~~ Number of children living: Ten

Husband ~~Wife~~ of Rebecca Harrison Cummings

Father's Name: Bernard Cummings Mother's Name: Nancy Cummings

Cause of Death: Primary: Organic Heart Disease — How long sick: Three years

Immediate: Heart Failure 57 — ~~Accident~~, ~~Suicide~~, H[redacted]side

Reported by: A. B. Glascock M.D.

Address: St. Michaels Talbot Co. Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79908

Attended by Dr. A. B. Glascock
St. Michaels Md

Seen by Coroner _____

of _____

Name in Full: Charles Thomas Dobson

Certificate of Death

Died at — Town: Near Twin Mills — County: Talbot — MARYLAND

Date 189: Month: 9 April — Day: 10 —

Age: Y. 14. M. 9. D. 15 —

Native of: Md.

Occupation: Farm

Male ~~Female~~ — ~~White~~ Colored — ~~Married~~ Single — Widow ~~Widower~~ — ~~Divorced~~ ~~Number of children living~~

Husband / Wife of ———

Father's Name: Chas. Dobson

Mother's Name: Julia A. Miller

Cause of Death — Primary: Drowning — 1526

How long sick: 14 hours

Immediate: Internal Hemorrhage

Accident, ~~Suicide, Homicide~~

Reported by: Julius A. Johnson

Address: Easton Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65066

Name In Full

Certificate of Death

Henry Dobson

Town

County

Died at Talbot MARYLAND

Month	Day	Y.	M.	D.	Native of	Occupation
Date 1899 April	18	Age 80			American	

X Male ~~Female~~ ~~White~~ X Colored X Married ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~

Number of children living

Husband of ~~Wife~~ Emeline Dobson

Father's Name Cant ascertain

Mother's Name Cant ascertain

Cause of Death	Primary	97	How long sick 2 years
	Immediate	Bright disease of Kidneys	Accident, Suicide, Homicide

Reported by John F Russum Undertaker

Address Hillsboro Caroline Co Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79888

Attended by Dr. Charles H Rose

Cordova Talbot Co. Md

Seen by Coroner _____

of _____

Name in Full

Certificate of Death

Sarah Christine Groetzinger

Died at Town Easton Dist. County Talbot MARYLAND

Date 189 9 Month apl. Day 28

Age Y. 4 M. 9 D. 11

Native of Penna

Occupation Infant

~~Male~~ Female ~~White~~ Colored ~~Married~~ Single ~~Widow~~ Widower ~~Divorced~~ ~~Number of children living~~

~~Husband~~ ~~Wife~~ of

97

Father's Name Ernest J. Groetzinger

Mother's Name Fannie E. Rankin

Cause of Death: Primary Chronic Parenchymatous nephritis — How long sick 4½ mos.

Immediate Heart Failure — ~~Accident Suicide Homicide~~

Reported by Joseph S Garrison M.D.

Address Easton Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, BOSTON

Name in Full | Certificate of Death

Mary Ann Harrison

Town | County

Died at Oxford | Talbot | MARYLAND

Date 1891 | Month 4 | Day — 9 | Age Y. 82 M. 5 D. 9 | Native of Md | Occupation Housekeeper

~~Male~~ | White | Married | Widow | ~~Divorced~~

Female | ~~Colored~~ | ~~Single~~ | ~~Widower~~ | Number of children living Two

~~Husband~~ of

Wife

Father's Name John Budges | Mother's Name Sarah Horney

Cause of Death: Primary Cerebral Apoplexy 42 | How long sick One hour

Immediate " " | Accident, Suicide, Homicide

Reported by J. A. Stevens

Address Oxford

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full | Certificate of Death

Charles Johnson

Died at Town Whitman County Talbot MARYLAND

Date 1899 Month Apr. Day 28 Age Y. 70 M. D. Native of Md. Occupation Laborer

Male ~~Female~~ ~~White~~ Colored Married ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~ Number of children living 12

Husband ~~Wife~~ of Francis Harris

Father's Name Mother's Name

Cause of Death Primary Dropsy 1550 How long sick 2 yr.

Immediate ~~Accident, Suicide, Homicide~~

Reported by James Sut M.W. & Son.

Address McDaniel Talbot Co

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, [illegible]

Name in Full Henry B. Leaverton

Certificate of Death

Died at Town County Talbot MARYLAND

Date 189 9 Month 4 Day 11 | Age Y. 80 M. D. | Native of | Occupation

Male White Married ~~Widow~~ ~~Divorced~~

~~Female~~ Colored ~~Single~~ ~~Widower~~ Number of children living 5

Husband of Wife

Father's Name

Mother's Name

Cause of Death: Primary Dropsy 1550 | How long sick

Immediate | Accident, Suicide, Homicide

Reported by Easton Ledger 4-13

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 7[illegible]

Rev. R. H. Adams

Name in Full

Certificate of Death

Anderson Moore

Died at Town St. Michaels County Talbot MARYLAND

Date 1899 Month April Day 29 | Age Y. 1 M. 9 D. | Native of St Michaels | Occupation —

Male ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

~~Female~~ Colored Single ~~Widower~~ ~~Number of children living~~

Husband of Wife — —

Father's Name Moses Moore

Mother's Name Hattie Moore

Cause of Death: Primary Enteroscolitis 82 | How long sick two weeks

Immediate Debility | ~~Accident~~, ~~Suicide~~, ~~Homicide~~

Reported by A. B. Glascock M.D.

Address St. Michaels Talbot Co Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Mary Nixon

Certificate of Death

Died at ~~Town~~ Easton County Talbot MARYLAND

Date 1899 Month 4 Day 19 Age Y. 45 M. D. Native of Talbot Co Occupation Housework

~~Male~~ ~~White~~ ~~Married~~ Widow Divorced

Female Colored ~~Single~~ ~~Widow~~ Number of children living 0

Husband of Wife

Father's Name James Jolly

Mother's Name Mary Jolly

Cause of Death Primary 5.9 How long sick

Immediate Rupture of Aneurism Accident, Suicide, Homicide

Reported by J. B. Merritt MD

Address Easton Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU

Name in Full Effie Perkins

Certificate of Death

Died at Town Lewiston County Talbot MARYLAND

Date 1899 Month April Day 14 Age Y. 23 M. D. Native of Occupation Housewife

~~Male~~ ~~White~~ Married ~~Widow~~ ~~Divorced~~

Female Colored ~~Single~~ ~~Widower~~ Number of children living 4

~~Husband~~ ~~of~~ Wife W. George Perkins

Father's Name Garrison Johnson Mother's Name Julia Johnson

Cause of Death Primary Grip 9 How long sick Four Months

Immediate Phthisis ~~Accident, Suicide, Homicide~~

Reported by Julius A. Johnson

Address Easton, Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65969

Name in Full James Raikes

Certificate of Death

Died at Town Easton County Talbot MARYLAND

Date 1899 Month Apr Day 28 | Age Y. 16 M. 3 D. 1 | Native of Md | Occupation —

Male ~~Female~~ | ~~White~~ Colored | ~~Married~~ Single | ~~Widowed~~ | ~~Divorced~~ ~~Number of children living~~

~~Husband~~ Wife of

Father's Name Daniel Raikes

Mother's Name Delia Young

Cause of Death: Primary Malarial Fever — How long sick 4 Months

Immediate Exhaustion 20

~~Accident, Suicide, Homicide~~

Reported by J. S. Garrison M.D.

Address Easton. Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 65968

Name In Full Adam Strayer

Certificate of Death

Died at Town Bellevue County Talbot MARYLAND

Date 189 9 Month 4 Day

Age Y. 84 M. D.

Native of

Occupation

Male ~~Female~~

White Colored

Married Single

Widow Widower

Divorced

Number of children living

Husband of
Wife

Father's Name

Mother's Name

Cause of Death: Primary 161

How long sick

Immediate

Accident, Suicide, Homicide

Reported by Transcript 4-29

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 71013